from those principles in a moment of trauma by a very limited number of people does not represent the will of the people of India and that India's secular and democratic principles will survive. The feedback and the response that we have had from the other countries including Kuwait from the Government and the other sources has been very encouraging. We had recently sent groups of eminent Indians including Members of Parliament to travel to these countries and interact with the people at their level I believe that the feedback has been very encouraging.

श्री रजनी रंजन साहू: महोदया, मंत्रीजी के उत्तर और मेरी जानकारी में थोड़ा गैप है।

उपसभापति: जाहिर है, वह मंत्री हैं और आप अभी मंत्री नहीं है।

श्री रजनी रंजन साहू: मंत्री जी का उत्तर संतोषजनक है, पर मुझे जो जानकारी है हालांकि इनके पवित्र इरादे और ख्यालात इन्होंने अपने उत्तर में प्रकट किए हैं, लेकिन इनके मिशन के लोग इनके इरादे की जिम्मेदारी पूर्णतः नहीं निभाते हैं। तो मैं मंत्री महोदय से आश्वासन चाहूंगा कि भारतवासी वहां बसते हैं, उनकी देखरेख के लिए जो कार्य मिशन कर रहे हैं, वह संतोषजनक हो और जो सांसद भारत से बाहर जाते हैं, उनकी तरफ इनके मिशन के लोग मुखातिब हों ताकि वहां जाने के बाद सांसदों को जो जानकारी रहती है, उसका इंटरेक्शन होने से मिशन के कार्यक्रम में और जो उनके वहां कार्यकलाप हैं, उनका अच्छे ढंग से निष्पादन हो सके, मैं यही आश्वासन मंत्री महोदय से चाहूंगा।

श्री सलमान खुर्शीद: महोदया, यहां तक मुझे मालूम है, हमारा प्रयास यह रहता है कि हमारे जो भी माननीय संसद सदस्य यहां से किसी देश में बाहर जाएं तो उनको हम पूरी सहायता और सहयोग दें और उनके साथ उनके लिए जो भी कार्यवाही करने की जरूरत है वह हम पूरी तरह से करें। परन्तु, अगर कहीं पर किसी कमी को किसी माननीय सदस्य ने महसूस किया हो तो उसकी सूचना वह हमको दें, हम उस पर पूरन कार्यवाही करेंगे।

*327. *[The Questioner (Shri Radhakishan Malaviya) was absent. For answer* vide *col.* 37i infra]

THE DEPUTY CHAIRMAN: Now, Question No. 328.

Centrally Sponsored Health Schemes in Uttar Pradesh

*328. MAULANA OBAIDULLAH KHAN AZMI:
SHRI SANJAY DALMIA[+]:

Win the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the centrally sponsored health care schemes being implemented at present in Uttar Pradesh particularly in tribal and rural areas;

(b) the allocation of funds to the State of Uttar Pradesh for 1992-93,1993-94 and 1994-9S for these schemes; and

(c) the achievements made during 1992-93 and 1993-94, under these schemes in Uttar Pradesh, district-wise

THE DEPUTY MINISTER IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI PAWAN SINGH GHATOWAR): (a) and (b) the following major Centrally sponsored health care schemes with allocation of funds for 1992-93,1993-94, and 1994-95 indicated against each are being implemented at present in Uttar Pradesh including tribal and rural areas:

[+]The question was actually asked on the floor of the House by Sh. Sanjay Dakota.

(Rs. in lakhs)

	Name of the schemes	Allocation 1992-93	of funds 1993-94	during 1994-95
1.	National Malaria Eradication Programme	606.13	1059.70	962.52
2.	National Leprosy Eradication Programme	364.88	267.13	413.40
3.	National Tuberculosis Control Programme	374.00	458.00	560.00
4.	National Programme for Control of Blindness	165.55	277.86	492.11
5.	National AIDS Control Programme Family	72.98	27.59	268.87
6.	Welfare Programme	16289.41	20515.53	16228.41

(c) District achievements of the programmes are monitored by the State Government. The scheme-wise achieve-

Statement

The Scheme-wise details of achievements in State of Uttar Pradesh

SI. No.	Name of the Scheme	Year	
		1992-93	1993-94
1	2	3	4
1.	National Malaria 'Eradication Programme		(in lakh)
	No. of blood samples examined	04.86	82.07
	No. of Malaria cases detected	1.12	1.08
	No. of Malaria cases given radical treatment	1.12	1.08
	Population protected through insecticidal sprays	279.5	226.25
	A.P.I, (per thousand)	0.87	0.77
2.	National Leprosy Eradication Programme	(in absolute	no.)
	No. of old cases in hand	2.72.059	1.92.555
	New cases detected	57,764	50,432
	Cases treated	56,737	49,160
	Cases discharged	1,37,268	92,620
3.	National Tuberculosis Control Programme	(in absolute	no.)
	New Cases detected	2.56.861	2.41.256 (Upto Feb., 1994)
	Sputum examined	5,13,951	7,13,378
4.	National Programme for Control of Blindness	(in absolute	no.)
	Cataract operations performed	2,34,759	3,43,422
5.	National AIDS Control Programme	AIDS testing facilities are available at 5 surveillance centres and 13 Zonal Blood Testing Centres.	
6.	Family Welfare Programmes		
	D.P.T.	43,89,000	46,90,830
	Polio	43,94,000	46,99,353
	B.C.G.	44,99,000	46,63,789
	Sterilisation	3,85,706	4,17,781
	I.U.D.	12,13,830	18,24,830
	C.C. Users	18,32,120	24,05,902
	O.P. Users	2,39,771	4,26,271

THE DEPUTY CHAIRMAN: Shri Sanjay Dalmia, your first supplementary please.

SHRI SANJAY DALMIA: Madam, from the answer given by the hon, Minister, it appears that on the Centrally sponsored health schemes, in the State of Uttar Pradesh they spend between Rs. 12/—Rs. 15/- per head. According to me, this figure is very low. I would like to know from the hon. Minister as to why only Rs. 12/—Rs. 15/- per head is being spent in the State of Uttar Pradesh which is already one of the poorest States in the country.

SHRI PABAN SINGH GHATOWAR: Madam, the major health budget is covered by the State Budget. The Central Government gives money to the State Government on the National Projects and the amount is distributed according to the national norms. So, what we are giving to the other States we are giving to Uttar Pradesh also.

SHRI SANJAY DALMIA: You are giving 15 rupees per head!

THE DEPUTY CHAIRMAN: Your second supplimentary.

SHRI SANJAY DALMIA: I am just saying you are giving rupees 12-15 per head for the State of Uttar Pradesh. *(Interruptions)* Madam, I want to know from the hon. Minister what the other norms are which he takes into account while distributing money under the Centrally sponsored schemes.

MISS SAROJ KHAPARDE: Madam, this is not a part of the Health Ministry. It is a part of the State Government.

SHRI PABAN SINGH GHATOWAR: Madam, the State of Uttar Pradesh is one of the largest States and the most populous State. I think, they have their state health budget also. They have to take into consideration the requirements of the people of their State. Madam, in the National Picket we go, for the State and specially the districts, according to the prevailing rate of the disease in a particular district, in a particular ares and in a particular State. According to that we distribute money to the State Governments to implement the National Projects.

THE DEPUTY CHAIRMAN: Shri Jagannath Misra.

एक माननीय सदस्य: मैडम, यू०पी० का सवाल है यह।

उपसभापति: आप भी यू०पी० के बारे में ही पूछेंगे।

डा० जगन्नाथ मिश्र: महोदया, मैं मंत्री महोदय से यह जानना चाहूंगा कि केन्द्रीय समपोषित जो स्वास्थ्य सेवाएं है, जो विभिन्न राज्यों में चलती हैं, क्या उनका कोई मूल्यांकन भारत सरकार अपने स्तर से कराती है? दूसरा, यह कि जो केन्द्रीय योजना है स्वास्थ्य संबंधी बिहार में मलेरिया के अंतर्गत .....(व्यवधान)

उपसभापति: बिहार नहीं, उत्तर प्रदेश का प्रश्न है।

It is a very limited question

श्री जगन्नाथ मिश्र: मैडम, जो पहली बात कही है, मलेरिया के अन्तर्गत जो कालाजार बीमारी है उत्तर प्रदेश में, बिहार में भी केस मिले हैं, इन बीमारियों के ईलाज के लिए भारत सरकार ने जो सहायता की बात की है, दवाएं भेजी हैं, उसका पूर्ण उपयोग न होने की वजह से एक लाख से अधिक लोगों की मृत्यु हुई है। तो क्या भारत सरकार केन्द्रीय योजनाओं के मूल्यांकन के लिए कोई प्रभावकारी प्रशासनिक तंत्र बनाएगी, जिससे कि राज्य सरकारों जो विकल होती हैं या राशि का दुरुपयोग करती है, उन पर रोक लगाई जा सके।

SHRI PABAN SINGH GHATOWAR: Madam, we give money to the State Governments under the National Malaria Eradication Project and the Central and State Government's contribution towards this is 50:50. The Central Government gives 50% and the State Government gives 50%. For Malaria, most of the money we give is in the form of materials like DDT and other things. Madam, we have given money for Kala-azar also. For this, I don't have the exact figures. We have given a lot of money to the Government of Bihar and we try to pursuade the State Government to properly utilise this money for the benefit of the patients.

डा० जगन्नाथ मिश्र: इसकी जांच करा देंगे।

उपसभापति: अब आप कह दीजिए कि जांच करा देंगे।

The Question Hour is over.

WRITTEN ANSWERS TO QUESTIONS

Bills pending before President for Assent

*321. SHRI K.R. MALKANI: Will the Minister of HOME AFFAIRS be pleased to state:

(a) the list of State Bills pending before the President for assent for more than six months; and

(b) whether Government would consider setting up the convention that the Presidential decision in these matters shall not be delayed beyond six months?

THE MINISTER OF HOME AFFAIRS (SHRI S.B. CHAVAN): (a) A statement is laid on the Table to the House. *(See bleow)*

(b) The State Legislations call for examination by the concerned Departments/Ministries of the Government of India and consultation with State Governments wherever found necessary. The concerned State Governments and the Central Ministries/Departments are reminded constantly to expedite their views in the matter. Discussions are also held where necessary, to expedite the clearance of the Bills.

Statement

List of State Bills pending before President for Assent for more than six months

SI. No.	Date of Receipt	Bill Name
1.	20/11/89	The Andhra Pradesh Highways Bill, 1989.
2.	28/11/89	The Andhra Pradesh Industrial Workers (Representation Participation in Management and Relief) Bill, 1989.
3.	09/02/93	The Public Wakfs (Extension of Limitation) (A.P. Amendment) Bin, 1992.
4.	11/02/93	The Andhra Pradesh prevention of Disfigurement of Open Places and Prohibition of Obscene and Objectionable posters & Advertisements Bill, 1992.
5.	09/08/89	Tthe Assam Highways Bill, 1989.
6.	20/06/90	The Assam Land Grabbing (Prohibition) Bill, 1990.
7.	05/02/92	The Jharkhand Area Development Council Bill, 1991.
8.	09/05/88	The Maharshi Dayanand University (Amendment) Bill, 1988.
9.	09/05/88	The Kurukshetra University (Amendment) Bill, 1988.
10.	17/04/89	The Indian Electricity (Haryana Amendment) Bill, 1989.
11.	04/05/92	The Code of Criminal Procedure (Kamataka Amendment) Bill, 1992.
12.	12/05/92	The Kamataka Krishna Basin Development Authority Bills, 1992.
13.	19/01/93	The Kamataka Tax on Entry of Goods (Amendment) Bill, 1992.